

“A Good Night’s Sleep”

With the advances in sleep technologies we have witnessed over the past 15 years, people who have been suffering from poor sleep can begin the process of having their sleep problems properly diagnosed and treated.

We all remember the sweet slumber of our youth, when we could fall asleep anywhere, stay asleep, and feel refreshed in the morning even if we did not have our full 8 hours. As we age, our sleep becomes more fragile and can become affected by noise, light, temperature, internal stress, physical pain as well as the substances we consume in the daytime and before bedtime. Sleep is especially affected by heavy meals, caffeine intake, nicotine, any alcohol use or prescription and non-prescription “sleep aids.”

Most people enjoy their sleep and feel that it is a precious, enjoyable part of their life. When we lose our ability to sleep well, we compromise our physical and mental health, as well as our abilities to handle stress, solve problems, make good decisions and get along well with other people. However, most people are not aware of how some of their very own behavior affects sleep hygiene. Here are some changes to consider in order to improve your sleep hygiene:

- 1) Remove the computer from your bedroom, if that is your “workcenter.” Once removed, shut off the computer at least two hours before bedtime. Computer time can be very stimulating (looking at interesting websites, sending/receiving email, downloading music, chatting, etc.) Try to wind down in the 2-3 hours before bedtime and avoid excess stimulation.
- 2) Keep your exercise regimen, particularly leg exercises such as jogging or treadmill work as far away from your bedtime as possible because this too can be overstimulating.
- 3) Do you like your bedroom? Is it cluttered, dusty, unappealing? Consider making it a more inviting place to come home to every night. If you are sleeping alone, the cause of possible insomnia may be due to loneliness. Consider ways to increase your friendship circle, as a way of adding more intimacy and connections to your life.
- 4) Do you do other things in your bed besides sleep or have sex? Some people view their bed as a “command center” where they eat, pay bills, lounge, talk on the phone, etc. Re-train your brain that your bed is for rest by removing these other activities to another room.
- 5) As we age, we become more sensitive to stress and this can affect sleep. Do a mental inventory of the things that cause you to feel stressed and eliminate them in the hours before bedtime. For example, does the late-night news upset you with sad news stories, dismal financial forecasts or world events in turmoil? Or, if you get upset by looking at your unbalanced checkbook in the evening, try to tackle this task at another part of the day when you have the mental energy to find solutions. At night, our brains need rest and re-charging and thus, are susceptible to environmental overload.
- 6) Be careful with “blue” light. Do you own a desk lamp that is advertised as “as natural as sunlight? If so, you probably know that it is a pleasant light to work in during the day and it gives you energy to complete your tasks. However, used at night these “blue lights” can be so overstimulating that they create temporary insomnia. If you are not trying to stay awake for a task, try to avoid these blue lights.
- 7) If you are not getting a good night’s sleep, do not resign yourself to it being an unsolvable problem. If your spouse is keeping you awake by snoring, insist on them having a sleep screening which could reveal an undiagnosed sleep disorder.

If you are having the sleep problem yourself, and your sleep partner's sleep behavior is not a factor, collect some data from your sleep partner or any other reliable source (hunting buddies, adult children, etc.) who might have heard you while you sleep. Do you snore, snort, gasp, thrash your legs or even seem to stop breathing in your sleep? Are any of these problems worse after you have consumed alcohol? Don't assume that it is harmless because it only occurs with alcohol. Alcohol is a sedative drug and can actually bring out the condition of sleep apnea in individuals who are at risk due to age, weight, anatomy, smoking, asthma, etc. Prescription or non-prescription sleep aids as well as some psychiatric medications can have the same effect in vulnerable individuals. If you must take psychiatric medications, and you are in one of these higher risk categories, it is important that you remain open to feedback from your sleep partner about your sleep behavior and report any new information to your doctor. If you would like to learn more about sleep apnea, go to: www.sleepapnea.org.

- 8) Undiagnosed depression is often a cause of poor quality sleep. Depression can develop slowly over time, or can be precipitated by an environmental stressor. If it goes untreated it can develop into a more serious type that can affect sleeping and eating. Depression that has evolved into this kind of disturbance should be brought to the attention of your doctor. Usually a combination of psychotherapy and medication produces the best long-term results.
- 9) If you are the type of person who finds it difficult to un-wind after a day at work, it becomes more important as you age to find physical outlets in order to release accumulated stress. We also live in a pressurized society where technology sometimes creates the expectation to be always "on" and "connected" through computers, cell phones, etc. Finding outlets can be as simple as a swim in the pool, yoga, meditation, or creating "tech-free" times in order to unwind.

- 10) If you would like to learn more about sleep, visit www.sleepfoundation.org.

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